

FEE \$302.00 GST exempt 1/7/23 - 30/6/24 Form No. RMT1v19

**T.1** 

## RIVER MURRAY PRESCRIBED WATERCOURSE Application to tag an Interstate water allocation for extraction in SA

Pursuant to Section 154 of the *Landscape South Australia Act 2019* and Schedule D of the *Murray-Darling Basin Agreement 2006* 

Note: Failure to provide complete details and/or prescribed fee will result in your application being returned for completion

Note: The State of Origin and the State of Destination must approve the tagged transfer before it can be effected.

**Note**: If this application is approved, you will also need a *Water Resource Works Approval* to take water, and a *Site Use Approval* to use the water. A person who furnishes information to the Minister or another authority under the Landscape South Australia Act 2019 (the Act) that is false or misleading in a material particular is quilty of an offence. Maximum penalty: \$20,000

Applicant Detail					
Full Name(s) of applicant(s)					
Contact Days		If Dod	. Composite ACN		
Contact Person		IT BOOY	If Body Corporate, ACN		
Contact Address					
Suburb		State		P/Code	
Telephone	١	Mobile			
E-mail					
Tag Account Detail					
<b>2.1</b> Do you have an existing South Au	stralian River Murray Wate	er Account against whi			
	•				
☐ Yes – Water Account Number	·		□ No	)	
			□ No	)	
☐ Yes – Water Account Number  2.2 Volume of water to be tagged (Ki			□ No	)	
☐ Yes – Water Account Number				)	
☐ Yes – Water Account Number  2.2 Volume of water to be tagged (Ki		Interstate Enti	□ No	)	
☐ Yes – Water Account Number  2.2 Volume of water to be tagged (Kill  Interstate Entitlement Detail		Interstate Enti		)	
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☐ Yes – Water Account Number  2.2 Volume of water to be tagged (Kii  Interstate Entitlement Detail  Interstate Account Number  Interstate Water Authority			tlement Number		

## ALL APPLICANTS MUST SIGN AND DATE THIS APPLICATION

Please be aware that it is an offence to provide information on this form that is false or misleading.

## **SECTION 4: SIGNATURE OF THE APPLICANT**

NOTF.	Each applicant must	complete ONF	only) of the	following	alternatives
NOIE.	Each applicant must	CONTINUETE CIAL	OHIVI OF THE	IUIIUWIIIE	aiteillatives

I/We declare that the information that has been provided on this application is true and correct.

Note: If signing as a company, two position bearers must sign e.g. Director, Company Secretary. If only one Director then Sole Director

must be stated as position held.									
Where the applicant is an individual or two or more persons									
Print Name	Sign Here			Date					
Print Name	Sign Here			Date					
Print Name	Sign Here			Date					
Print Name	Sign Here			Date					
Where the applicant is a company or an ir	2. Where the applicant is a company or an incorporated association and authorised persons sign on behalf of the organisation								
Print Name of authorised person	Position held								
Signature	Date								
Print Name of authorised person	Position he								
Signature		Date							
The person(s) duly authorised to sign for and on behalf of: (print name of company or incorporated association)									
3. Where the applicant is a company or an incorporated association and the seal is affixed:									
The Seal of: (print name of company or incorporated	d association)								
was hereby affixed in the presence of:									
Signature	A	ffix Seal Here:							
Print Name									
Position held	Date								
Signature									
Print Name									
Position held	Date								
Return application and payment to:			Office Location:						
Department for Environment and Water				28 Vaughan Terrace					
PO Box 240			BERRI SA 5343						
BERRI SA 5343									
Make cheques or money orders payable to: Department for Environment and Water									
For credit card payments or other payment options (08) 8595 2053									